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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 3323-P0001C		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 12	Total Claims (37 CFR 1.16(j)) Independent claims (37 CFR 1.16(i))	(B) 24	**** 4 =	x \$ _____ =	or	x \$18 =	72	
(C) 3		(D) 5	* 2 =	x \$ _____ =		x \$80 =	160	
Basic Fee (37 CFR 1.16(h))				\$ 710			\$710	
Total Filing Fee				\$		OR	\$ 942.00	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 4	MINUS **	24	* =	x \$ _____ =		x \$ _____ =	0
Independent Claims (37 CFR 1.16(i))	*** 1	MINUS *****	5	=	x \$ _____ =		x \$ _____ =	0
Total Additional Fee					\$	OR	\$ 0	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>19-4516</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>942.00</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p>								
11/10/00								
Date								
								
				Signature of Applicant, Attorney or Agent of Record				
				Richard J. Basile				
				Typed or printed name				

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